



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/26/93

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD986648228

FACILITY NAME -> BLOOMFIELD BOARD OF EDUCATION

MAILING ADDRESS -> 155 BROAD ST
BLOOMFIELD, NJ 07003

INSTALLATION ADDRESS -> 60 HUCK RD
BLOOMFIELD MIDDLE SCHOOL NORTH
BLOOMFIELD, NJ 07003

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: WEISMAN, GARY
DIR SCH FACIL
BLOOMFIELD BOARD OF EDUCATION
60 HUCK RD
BLOOMFIELD MIDDLE SCHOOL NORTH
BLOOMFIELD, NJ 07003

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☐

B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NJ D982648228

II. Name of Installation (Include company and specific site name)

Bloomfield Middle School (North)

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

60 Huck Road

Street (continued)

+

City or Town

Bloomfield

State

ZIP Code

NJ 07003-

County Code

County Name

Essex

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

155 Broad Street

City or Town

Bloomfield

State

ZIP Code

NJ 07003-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

Weisman

(first)

GARY

Job Title

DIR SCHOOL FAC

Phone Number (area code and number)

201-680-8500

VI. Installation Contact Address (See Instructions)

A. Contact Address

Location Mailing

X

B. Street or P.O. Box

SAME

City or Town

State

ZIP Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

Bloomfield Board of Education

Street, P.O. Box, or Route Number

155 Broad Street

City or Town

Bloomfield

State

ZIP Code

NJ 07003-

Phone Number (area code and number)

201-680-8500

B. Land Type

C. Owner Type

D. Change of Owner Indicator

Yes No

(Date Changed)

Month Day Year

NSD 986 648 228

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

A. Hazardous Waste Activity		B. Used Oil/Fuel Activities	
<input type="checkbox"/> 1. Generator (See Instructions) <input checked="" type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.) <input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)	<input type="checkbox"/> 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions. <input type="checkbox"/> 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control	<input type="checkbox"/> 1. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification	<input type="checkbox"/> 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. EP Toxic (D000) ☐ (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature <i>Gary Weisman</i>	Name and Official Title (type or print) Gary Weisman Dir. of School Fac.	Date Signed 6/4/92
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the instructions for filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

53 APR 15 PM 2:39

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number
PROGRAMS BRANCH

II. Name of Installation (Include company and specific site name)

Bloomfield Middle School (North)

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

60 Huck Road

Street (continued)

X

City or Town

Bloomfield

State

ZIP Code

NJ 07003-

County Code

County Name

Essex

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

155 BROAD STREET

City or Town

BLOOMFIELD

State

ZIP Code

NJ 07003-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

WEISMAN

(first)

GARY

Job Title

DIR SCHOOL FAC

Phone Number (area code and number)

201-680-8500

VI. Installation Contact Address (See instructions)

A. Contact Address

B. Street or P.O. Box

Location

☒ Mailing

SAME

City or Town

State

ZIP Code

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

Bloomfield Board of Education

Street, P.O. Box, or Route Number

155 Broad Street

City or Town

Bloomfield

State

ZIP Code

NJ 07003-

Phone Number (area code and number)

201-680-8500

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed) Month Day Year

Yes No

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
1. Generator (See Instructions)	3. Treater, Storer, Disposer (at Installation)	1. Off-Specification Used Oil Fuel	
<input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)	<input type="checkbox"/> Note: A permit is required for this activity; see instructions.	<input type="checkbox"/> a. Generator Marketing to Burner	
<input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.)	4. Hazardous Waste Fuel	<input type="checkbox"/> b. Other Marketer	
<input checked="" type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)	<input type="checkbox"/> a. Generator Marketing to Burner	<input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device	
2. Transporter (Indicate Mode in boxes 1-5 below)	<input type="checkbox"/> b. Other Marketer	<input type="checkbox"/> 1. Utility Boiler	
<input type="checkbox"/> a. For own waste only	<input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device	<input type="checkbox"/> 2. Industrial Boiler	
<input type="checkbox"/> b. For commercial purposes	<input type="checkbox"/> 1. Utility Boiler	<input type="checkbox"/> 3. Industrial Furnace	
Mode of Transportation	<input type="checkbox"/> 2. Industrial Boiler		
<input type="checkbox"/> 1. Air	<input type="checkbox"/> 3. Industrial Furnace		
<input type="checkbox"/> 2. Rail	<input type="checkbox"/> 5. Underground Injection Control		
<input type="checkbox"/> 3. Highway			
<input type="checkbox"/> 4. Water			
<input type="checkbox"/> 5. Other - specify			

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A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. EP Toxic (D004)	(List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

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Signature <i>Gary Weisman</i>	Name and Official Title (type or print) Gary Weisman Dir. of School Fac.	Date Signed 6/4/92
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